

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

FILED NO. 10 576973 FILING DATE
ATTORNEY

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1				51						
2					1		52						
3							53						
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45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.			1		1								
TOTAL DEP.													
TOTAL CLAIMS			2										